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OFM

**Asset Tag** 

## State of Michigan Financial Management Guide Part II - Accounting and Financial Reporting

Chapter 21, Section 950, Exhibit B

Impairment of Capital Assets Impairment Reporting Form

Amount of

Insurance

Date of

Insurance

**DEPT CODE** 

Permanent (P)

or Temporary (T)

OFFICE OF THE STATE BUDGET, OFFICE OF FINANCIAL MANAGEMENT

DEPARTMENT/AGENCY

## CAPITAL ASSETS IMPAIRMENT REPORTING FORM (excluding inexhaustible assets)\*

Type of

**CAMPUS** 

Date of

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<ol> <li>physical damage, 2) enactment/approval of laws/regulations</li> <li>closure of a prison) or 5) construction stoppage due to lack or</li> </ol>	s or changes in environme	ntal factors. 3) techr		r obsolescence, 4)	change in manner o	r expected
1 ille				Phone		
FOR OFFICE	OF FINANCIAL M	ANAGEMENT	USE ONLY			
	Signature  Title  Title	1) physical damage, 2) enactment/approval of laws/regulations or changes in environme i. closure of a prison) or 5) construction stoppage due to lack of funding or negative appr omments:  Signature  Title	1) physical damage, 2) enactment/approval of laws/regulations or changes in environmental factors, 3) technic closure of a prison) or 5) construction stoppage due to lack of funding or negative appropriations.  Omments:  Signature  Title	closure of a prison) or 5) construction stoppage due to lack of funding or negative appropriations.  Omments:	1) physical damage, 2) enactment/approval of laws/regulations or changes in environmental factors, 3) technological development or obsolescence, 4) it closure of a prison) or 5) construction stoppage due to lack of funding or negative appropriations.  Omments:  Signature Date  Title Phone	1) physical damage, 2) enactment/approval of laws/regulations or changes in environmental factors, 3) technological development or obsolescence, 4) change in manner of a prison) or 5) construction stoppage due to lack of funding or negative appropriations.  Omments:  Signature